



Eliminating Health Disparities

by 2010

Tools, Skills & Networks for Action

March 2, 3 and 4, 2003

Radisson Hotel

200 Stuart Street

Boston, MA

Presented by the New England Regional Minority Health Committee
Hosted by the Massachusetts Department of Public Health
Supported in part by the US DHHS/Office of Minority Health/ Region I



The Third New England Regional Conference

Sunday, March 2nd

12:00-1:00	Registration	
1:00-1:30	Welcome and Native American Opening Ceremony	
1:30-3:00	The Emotional, Physical and Spiritual Health of the Indigenous Indians of the First Nations in New England: Past, Present and Future.	
3:00 - 3:15	Break	
3:15 - 4:45	Workshop Session A	p2
4:45 - 5:45	Workshop Session B	p3

Monday, March 3rd

6:30-7:30	Morning Exercise	
7:30-8:30	Registration & Continental Breakfast	
8:30- 9:30	Welcome	
9:30- 10:30	<i>Keynote:</i> Tommy G. Thompson (invited)	
10:30 -10:45	Break	
10:45 -12:15	Workshop Session C	p4
12:15 - 2:00	Lunch <i>Keynote:</i> Dr. Joseph Betancourt	
2:00- 3:30	State Breakout Sessions	
3: 30 - 3:45	Break	
3:45- 5:15	Workshop Session D	p5

Tuesday, March 4th

6:30 - 7:30	Morning Exercise	
7:30 - 8:00	Registration & Continental Breakfast	
8:00 - 9:00	Welcome <i>Keynote:</i> Ruben J. King-Shaw, Jr.	
9:00 - 9:15	Break	
9:15 - 10:45	Workshop Session E	p7
10:45- 11:00	Break	
11:00 - 12:00	Workshop Session F	p9
12:00 - 2:00	Lunch <i>Keynote:</i> Dr. Nathan Stinson Cultural Arts: Dr. Lincoln H. Douglas	
2:00 - 3:30	State Breakout Sessions	
3:30 - 4:00	Wrap-up and Closing	

Keynote Speakers

Tommy G. Thompson
Secretary of Health & Human Services
US Department of Health and Human Services
(invited)

Nathan Stinson Jr., PhD, MD, MPH
Deputy Assistant Secretary for Minority Health
US Department of Health and Human Services

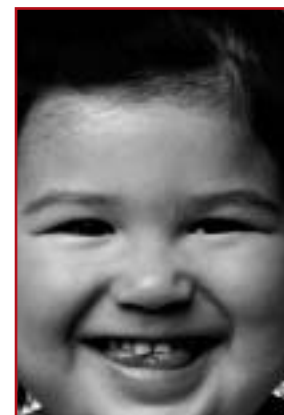
Ruben J. King-Shaw Jr.
Deputy Director and Chief Operating Officer
Centers for Medicare and Medicaid Services

Joseph R. Betancourt MD, MPH
Senior Scientist, Institute for Health Policy and
Director for Multicultural Education at
Massachusetts General Hospital

Accreditation

The Bureau of Communicable Disease Control, Massachusetts Department of Public Health is accredited by the Massachusetts Medical Society to sponsor intrastate continuing medical education for physicians. The Bureau of Communicable Disease Control, Massachusetts Department of Public Health, designates this educational activity for a maximum of 13.5 hours in category I credit towards the AMA Physician's Recognition Award. Each physician should claim only those hours that he/she actually spent in the educational activity.

This Program is offered by the Massachusetts Department of Public Health, Bureau of Communicable Disease Control. A maximum of 16.2 nursing contact hours for this program will be provided in accordance with the Board of Registration in Nursing Regulations governing continuing education (CMR 244 5.00).



Conference at a glance

Sunday, March 2nd

12:00-1:00 Registration

1:00-1:30 Welcome: *Brunilda Torres, LICSW*, Director, Office of Multicultural Health, Massachusetts Department of Public Health, Conference Co-Chair

Native American Opening Ceremony:

Hawk Henries, Flute; Nipmuc Nation, Turtle Drummers

1:30-3:00 The Emotional, Physical and Spiritual Health of the Indigenous Indians of the First Nations in New England: Past, Present and Future

Yvette M. Tolson, Nipmuc Women's Health Coalition; *F. Ryan Malonson*, Aquinnah Wampanoag; *Barbara Namias*, Native American Indian Center of Boston; *Gloria Lewicki*, Nipmuc Indian Tribe; *Ramona Peters*, Mashpee, Wampanoag; *Dr. Jackie Voraphal*, Native American Indian Center of Boston; *Stephanie (Tobey) Roderick*, Diversity Disability Resource Center; *Dr. William Millar II*, Pequot Pharmaceutical Network

This panel presentation will review the historical impact that New England legislative policies have had on indigenous Indian children and their families over the past 339 years. The medicine wheel will be shared to foster dialogue between the panel and participants and to help understand its use in the wellness and healing process, measurement tool and as means to accessing culturally sensitive health care services. Topics to be discussed include the lack of trust, social issues and cultural barriers Indian Nations' experience regarding utilization of mainstream health care systems including their fears and hopes. An in-depth look at the current health status of the Indigenous Indians of New England and the unification with mainstream health services. The panel and participants will look out into the future for the purpose of uniting as one, and to learn how to work together in the meeting the goal of truly Eliminating Health Disparities among indigenous Indians throughout New England.

3:00 - 3:15 Break

3:15 - 4:45 Workshop Session A

AI Future Leaders - A Peer Adolescent HIV Prevention Project

Bobbie D. Bagley, RN, BSN, MPH New Hampshire Minority Health Coalition, Manchester, NH

Future Leaders, is a youth-peer educator HIV prevention program designed by the New Hampshire Minority Health Coalition to empower youth by enhancing their skills and knowledge using various age-appropriate, interactive teaching methods. Science-based prevention strategies suggest that instructional approaches that combine thinking skills and social skills are most effective at changing individual behavior. Using active learning methods this workshop will provide those working with adolescents techniques to help empower them to change individual values, attitudes and group norms leading to a change in high-risk behaviors.

A2 A Curriculum Development Model to Fulfill the Health People 2010 Objectives

Kara Connors, MPH, Community Campus Partnerships for Health, Concord, MA; *Suzanne Cashman, ScD*, University of Massachusetts Medical School, Worcester, MA
Potential strategies for achieving the Healthy People 2010 objectives include curricular development strategies that build the capacity of health professionals and community partners to deliver health promotion. This workshop introduces the Community-Campus Partnerships for Health's (CCPH) publication, "Advancing the Healthy People 2010 Objectives Through Community-Based Education: A Curriculum Planning Guide" utilizing interactive exercises and case study discussion.

A3 Providing Health Information for Minority Communities the Medical Library Experience - Lessons Learned

Peter Droese, MSLS, Massachusetts Division of Medical Assistance; *Kate Kelly, MLIS*, Tufts University Health Science Library; *Deborah H.L. Sibley, MEd, MLS*, University of Massachusetts Medical School; *Ming Sun, MPH, CHES*, Access to Resources for Community Health

This session offers an overview of consumer health libraries services as well as experiences in using NLM funding to provide health information. Participants will be presented with information on how to use the library staff as a tool to improve the health of community residents.

A4 Community Health Workers: Closing the Health Disparities Gap

Durrell Fox, New England HIV Education Consortium, Boston, MA; *Lisa Renee Siciliano, LSWA*, MA Department of Public Health, Boston, MA

The presenters will give a brief description of Community Health Workers (CHW) and their critical role in eliminating health disparities. Examples will be given of CHW involvement in coordinated efforts to eliminate health disparities. The participants, through interactive discussion, will identify strategies to utilize and integrate community health workers into the health care delivery system.

A5 Make Your Voice Heard! Organize and Advocate to Combat Childhood Overweight and Obesity in Communities of Color

Roberta Friedman, ScM, MA Public Health Association, Jamaica Plain, MA; *Vivien Morris, MPH, MS, RD, LDN*, MA Department of Public Health

Participants will learn current information, statistics and trends on the impact of childhood obesity on communities of color, including information about related chronic diseases and their impact. Attendees will learn advocacy tools for use in raising awareness, educating, and making change in communities. Current legislation will also be discussed.

A6 The Woman to Woman Program

Sienna Larson, MS, New Hampshire Minority Health Coalition, Manchester, NH

The Woman to Woman Program is a successful model for

outreach to underserved individuals and educating them on a wide variety of health issues. This presentation will include a discussion of the challenges faced by new and rapidly expanding minority communities in New Hampshire in accessing health care and related services and the challenges faced by providers to serve individuals from these communities.

A7 Got Asthma? A Community-Based Asthma Education Initiative

Meenakshi Verma, MPH, The Jamaica Plain Asthma Environmental Initiative, Jamaica Plain, MA

Community-based initiatives educate children and families with asthma to raise awareness of management and control of asthma in Jamaica Plain, Massachusetts. Presentation includes a discussion of a community-based, family empowerment model.

A8 Massachusetts Hepatitis C Coalition: The Power of Advocacy

Rachel Wilson, MPH, MA Public Health Association, Jamaica Plain, MA

Learn about how the Massachusetts Hepatitis C Coalition has brought together a variety of people from different constituencies and backgrounds to address this disease through advocacy, education, and coalition building. Participants will learn the advocacy power of coalitions, the importance of a participatory process, and effective tools to relay advocacy messages to policymakers.

4:45 - 5:45 Workshop Session B

B1 The PACT Project

Heidi Behforouz, MD, Brigham and Women's Hospital, Boston, MA
The Prevention and Access to Care and Treatment (PACT) Project employs community health promoters to improve health outcomes and well being for under-served HIV-positive individuals in Boston. Session will cover practical approaches to overcoming access to care barriers for HIV-positive individuals living in resource-poor settings; complex HIV adherence interventions, including directly observed therapy (DOT); and the use of peer leaders.

B2 The Chinese Health Care Culture and Institutional Medicine

Tom Chung, PhD, Executive Office of Elder Affairs, Boston, MA
Many health care providers complain about the difficulty working with Asian patients. Failure to show up, non-compliance, taking traditional medicine without the doctor's knowledge, communicating in imprecise and misleading terms, etc. Do they trust western medicine at all? Find out how the Chinese Health Care Culture differs from the Institutional Medicine approach

B3 Community Environmental Health & Justice: Results of an Innovative Medical Communities Project

Terry A. Greene, MS, JSI Center for Environmental Health Studies, Boston, MA; Davida Andelman, MPH, Bowdoin Street

Health Center, Dorchester, MA; Ali Noorani, MPH, Health Services Partnership of Dorchester, Dorchester, MA

Presenters will discuss ways to engage health providers in gathering environmental health data to promote health and prevent disease. Attendees will become familiar with tools used to learn patients' environmental health status and national pilot sites selected to address concerns over disproportionate risks to under-served populations.

B4 Reducing Health Disparities via Enhanced Access and Advocacy Networks: The Massachusetts-Mental Health Services Program for Your Experience

Katherine E. Grimes, MD, MPH and Chip Wilder, LICSW, Massachusetts Mental Health Services Program for Youth, Boston, MA

The Massachusetts-Mental Health Services Program for Youth is an integrated system of care for children with serious emotional disturbances and their families. Presenters will demonstrate a creative policy approach enhancing access and advocacy for children to effectively reduce health disparities for vulnerable populations.

B5 Stimulating Behavior Change for Healthy Living

Jeanie Holt, MS, ARNP, Carolyn N. Oguda, and Sonia L. Parra
New Hampshire Minority Health Coalition, Manchester, NH
The NH REACH 2010 Initiative is a CDC-funded collaborative working to improve the health status of African-descent and Latino communities through outreach, education and research with a focus on diabetes and hypertension. The initiative tests 4 interventions designed to stimulate people to change unhealthy behaviors and adopt healthy ones: theatrical performances; sharing life experiences and stories; stages of change curriculum; and medically based English as a Second Language course.

B6 Who Counts? The Classification and Application of Race and Ethnicity in Public Health Data: Proceedings of a Symposium Presented by the New England Coalition for Health Equity

M. Barton Laws, PhD, Latin American Health Institute, Boston, MA; Curtiss Reed, ALANA Community Organization, Brattleboro, VT

This session will provide an overview of a symposium featuring presentations by experts and activists and participatory workshops with structured discussion among attendees and expert panelists on issues related to racial and ethnic classification.

B7 Working Towards a Continuum of Access to Language Services as a Key Tool in the Elimination of Health Disparities

Edith H. Mas, RN, MSW, MA, Merrimack Valley AHEC, Lawrence, MA; Joanne Calista, MSW, Central MA AHEC, Worcester, MA; Lisa M. Morris, MS, Statewide AHEC Program, Worcester, MA

Panelists will address the issues that need to be reviewed and incorporated when developing a continuum of access to language services as a key tool for eliminating health disparities.

B8 Spirituality and Health: Diverse Perspectives on the Sacred Healing Arts

Ester R. Shapiro, PhD, University of Massachusetts Boston, Boston, MA; *Sonith Peou*, Metta Health Center, Lowell, MA
A diverse panel of speakers from different communities (Latino, African American, African immigrant, Asian American) as well as representing different sectors of the health care system will make brief presentations and engage participants in a dialogue on spirituality and health.

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6:30-7:30 Morning Exercise, "Physical Activity from Around the World", Train Boston

7:30-8:30 Registration & Continental Breakfast

8:30- 9:30 Welcome

9:30- 10:30 Keynote: Tommy G. Thompson (invited)
Secretary of Health and Human Services, US DHHS

10:30 -10:45 Break

10:45 -12:15 Workshop Session C

C1 Implementation and Evaluation of a Community-Centered Initiative to Eliminate Disparities in Breast and Cervical Cancer Mortality among Black Women in Boston

JudyAnn Bigby, MD, *Amy Willard, MPH* and *Gillian Barclay, DDS, MPH, DrPH*, Brigham and Women's Hospital, Boston, MA; *Lois McCloskey, MPH, DrPH* and *Linda Hudson, ScM*, Harvard School of Public Health, Boston, MA; *Karen Freund, MD, MPH* and *Michelle David, MD, MPH*, Boston Medical Center, Boston, MA

The REACH Boston 2010 Breast and Cervical Cancer Coalition is a community-centered coalition of community women, providers, public health workers, and others. Addressing disparities requires interventions at multiple levels, and the Coalition identified several factors that contribute to disparities including different levels of awareness about risk factors for cancer and attitudes about screening, barriers to care related to cultural competence, and inadequate follow-up for abnormal Pap smears and mammograms. Panelists will describe the REACH Boston 2010 project, the evaluation strategy, and some of the challenges related to evaluation.

C2 Developing a State Health Department Minority Health Surveillance Program: the Massachusetts Approach

Bruce B. Cohen, PhD, *Malena Orejuela, MPH*, *Christine Judge, MS*, *Jayne West, PhD*, and *Susan Keyes, DrPH*, MA Department of Public Health, Boston, MA

Massachusetts Department of Public Health has developed an extensive minority health surveillance program. Panelists will present a framework for minority health surveillance and research including, monitoring health indicators by race and ethnicity. Discussion will include using existing state health department surveillance data to focus on minorities' health status, demographic, and disease risk factor information crucial to identifying disparities, developing policy, and targeting programs that can eliminate disparities.

C3 Addressing Behavioral Health Disparities and Improving Cultural Competence within a Statewide System of Care

Arthur C. Evans, PhD, *Wayne F. Dailey, PhD* and *Jose Ortiz, MBA, MA, LADC*, Department of Mental Health and Addiction Services, Hartford, CT; *Ijeoma Achara-Abrahams, PsyD*, Yale University

The panel describes a systematic approach for addressing behavioral health disparities (as identified in the Surgeon General's Supplemental Report on Mental Health: Culture, Race and Ethnicity) and for improving cultural competence within a complex system of mental health and addictions services. The panel will discuss cultural competence and strategies used to detect and reduce disparities and improve cultural competence within a statewide system of care.

C4a Massachusetts Injection Drug Users Utilization of Needle Exchange and Substance Abuse Treatment Services

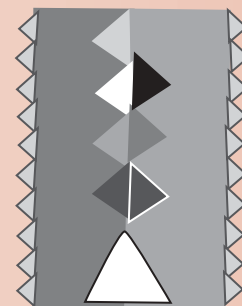
Therese Fitzgerald, MSW, LCSW, Boston University School of Social Work, Boston, MA; *Timothy Purington, EdM*, Tapestry Health Systems, Inc.; *Karen Davis, MSW, MPH*, Faith Ferguson, PhD, and *Lena Lundgren, PhD*, Center on Work and Family at Boston University, Boston, MA

The findings presented are from a longitudinal study, 1996-2001 identifying substance abuse treatment needs among African American, Latino and white injection drug users (IDUs). Results indicate that IDUs who are engaged in reducing the harm of their needle use through using needle exchange services are more likely to be engaged in other harm reduction behaviors by entering substance abuse treatment more frequently as well as entering higher quality drug treatment services compared to IDUs who do not use needle exchange services. The presentation includes a discussion of the practice implications of the findings for health service providers. 45 minutes **—and—**

C4b HIV/AIDS Regional Resource Network Project

Jocelyn McCree, US Department of Health and Human Services, Boston, MA; *Marisa Bolognese*, Twin States Network, Bellows Falls, VT; *Carline Louizia*, Mass Community Health Services, Brockton, MA; *Nancy Morse*, MetroWest Latin American Center, Framingham, MA; *Shalom Odokara*, Women In Need, Inc., Portland, ME; and *Pastor Pierre Zephir*, Dorchester Nazarene Compassionate Center, Dorchester, MA

The HIV/AIDS Regional Resource Network Project is a capacity building, training, and technical assistance project funded by the Congressional Black Caucus through the Office of Public Health and Science, and the Office of Minority Health at the Department of Health and Human Services. The workshop objective is to inform participants about the regional project and increase awareness of HIV/AIDS programs targeting ethnic and racial minorities within the region. 45 minutes



C5a Social Transformation Models: Public Health Practice Strategies for Community-Centered Coalition Building

Brian K. Gibbs, PhD, MPA, Harvard University School of Public Health, Boston, MA

During this presentation, participants will be introduced to a REACH 2010 project, Cherishing Our Hearts and Souls, in Roxbury, MA. The workshop will explore community intervention strategies addressing cardiovascular disease and racism through experience-based social transformation and public health practice models. The presentation will include a discussion of two models that have strong implications for sustainable community-centered interventions involving the elimination of health disparities. 45 minutes **—and—**

C5b Model Programs Addressing Racial and Ethnic Health Disparities

Julie Nelson, MPH, National Association of County and City Health Officials, Washington, DC

The National Association of County and City Health Officials (NACCHO) will present findings from Model Programs Addressing Racial and Ethnic Health Disparities, their collaborative project with the Association of State and Territorial Health Officials (ASTHO). A compendium highlights innovative state and local health department programs that seek to eliminate racial and ethnic disparities in health and promotes information sharing across states and localities. The presentation will focus on common themes components of programs in the compendium, and program development and evaluation information gathered during the focus groups. 45 minutes

C6a A Community Survey of Cambodian Adults to Assess Risk Factors for Diabetes and Cardiovascular Disease: Methods and Findings

Susan Koch-Weser, MS and Sidney Liang, Lowell Community Health Center, Lowell, MA

This presentation will include a discussion of the development and implementation of a community survey for the Cambodian Community Health 2010 (CCH2010) project in Lowell, Massachusetts. Additional topics include staff training and cultural adaptation of standard questions, and survey results. 45 minutes **—and—**

C6b Cardiovascular Disease and Diabetes among South Asians: Literature Review and Recommendations

Rachel Zachariah, RN, DNSc, Northeastern University, Boston, MA, Rahel Mathews, MPH

South Asians comprise 20% of the Asian category in the US. However, very little is known about their health. Health priorities of the group "Asians" do not fully explain the health needs of South Asians. This session will present findings from a review of international research studies from 1991-2002. Careful examination of traditional standards of risk and data collection, additional research and health education will also be discussed. 45 minutes

C7 Planning and Implementing a Hospital Based Medical Interpreter Program

Barbara Nealon, LSW, A-CC, Adan Cuadra, Cheryl Boissy, MSW, LICSW and Wilmont Davis, Heywood Hospital, Gardner, MA

The panelists will present a model of best practice methods for excellence in customer care through a comprehensive medical interpreter program which illustrates the potential for increasing the skills and personal development of current employees and maximizing resources to meet the needs of hospital staff, patients, and families. Participants will be able to assess the need and feasibility of developing similar in-house programs in their own agencies and practice settings..

C8 Cultural Competence and Healthy Communities: Will Community Cultural Competence Eliminate Health Disparities?

Beau Stubblefield-Tave, MBA, The Stubblefield-Tave Group, Newton, MA

Can we foster collaboration between the healthier communities movement and cultural competence advocates to help eliminate disparities? Health care has focused primarily on the cultural competence of individual clinicians and provider organizations. The healthier communities movement embraces a holistic view of health. Participants will discuss joining these models together to create conceptual, political and programmatic synergies that will help eliminate health disparities.

12:15 - 2:00 Lunch Keynote: Dr. Joseph Betancourt
Massachusetts General Hospital; Cultural Arts Presentation

2:00- 3:30 State Breakout Sessions

3:30 - 3:45 Break

3:45- 5:15 Workshop Session D

D1 Cancer Prevention and Treatment Demonstrations for Ethnic and Racial Minorities

Vanessa Calderon-Rosado, PhD, John C. Capitman, PhD, and Sarita Malik Bhalotra, MD, PhD, Brandeis University, Heller Graduate School, Waltham, MA

The Centers for Medicare and Medicaid Services (CMS) engaged the Schneider Institute for Health Policy at Brandeis University to provide guidance on the design of nine Medicare demonstrations on reducing racial and ethnic (R/E) disparities in cancer prevention, treatment and outcomes. Presenters will identify models with a high probability of reducing cancer disparities for R/E Medicare beneficiaries.

D2 Cross Cultural Mental Health

Lynn Clowes, MA, NH Minority Health Coalition, Manchester, NH; Anna M. Pousland, MS, RNC, and Marie Metoyer, MD (retired), The Mental Health Center of Greater Manchester
NH Minority Health Coalition and The Mental Health Center of Greater Manchester (Center) are partners in a comprehensive multi-year project to dramatically increase the effectiveness of Center staff in serving clients from all of

NH's co-cultural communities. This presentation will explore the intentional long-term initiative of a mental health center in increasing effectiveness in cross-cultural provider/client interactions, including components of organizational structure, practice, policy, and attitude.

D3 Cultural Competence Through Awareness, Understanding and Experience: A Project of the Family Van Program

Alba Cruz, PhD, MPH, and Toni K. Williams The Family Van, Harvard Medical School, Roxbury, MA

Cultural competence in health care is essential to eliminating racial, and ethnic health disparities. Many medical schools have incorporated cultural competence into their curriculums. However, some curriculums lack a context for understanding the social, economic, environmental and historical issues affecting the health of underserved communities. This presentation will describe the Family Van, a mobile health services unit, which offers medical students a unique opportunity, through firsthand experiences, to develop awareness of the health care system from the perspective of vulnerable populations, and explore the effectiveness of experiential learning in teaching cultural competence for health professionals.

D4 Reducing Health Disparities in Mammography Utilization: Targeting the Dually Eligible Population

Michele Kelvey-Albert, MPH, CHES, Judith K. Barr, ScD, Maureen Curry, Anne Elwell, Marcia Petrillo, MA and Thomas P. Meehan, MD, MPH; Qualidigm, Middletown, CT

This presentation will describe a two-pronged intervention by Qualidigm, the Healthcare Quality Improvement Organization (QIO) for Connecticut, to address the disparity in rates of mammography screening between women eligible for both Medicare and Medicaid (i.e. "dually eligible") and other Medicare beneficiaries. Implementation issues to be discussed include: defining and identifying the target population; developing community collaborations; and testing the materials.

D5a Building a Multicultural Health Infrastructure: The State of Connecticut Experience

Ramon Rojano, MD, MPH, MFT, City of Hartford, Hartford, CT

This presentation provides an overview of the development of the Connecticut Multicultural Health Steering Committee, Multicultural Health Office, a Multicultural Health Advisory Commission, and the Connecticut Health Foundation. The intention is to build the Multicultural Health Infrastructure in the State of Connecticut. This workshop will provide participants with hands on information about the plan, the achievements, and, most importantly about the challenges associated with this process. Progress report on other findings and actions will be also presented. 45 minutes **-and-**

D5b Assessing the Capacity of Public Health Data Bases to Monitor Health Disparities Among Multicultural Populations in Connecticut

Ratan J. Singh, PhD, MPH, CT Department of Public Health, Hartford, CT

The objective of this study was to assess the capacity of public health databases to monitor health disparities among Connecticut's multicultural populations. The findings of this project will help policy development in support of the federal Healthy People 2010 goal of eliminating health disparities among racial and ethnic minorities by the year 2010. 45 minutes

D6 Can Cultural Competency Reduce Racial and Ethnic Health Disparities?: The Case for Clinical Cultural Competence Training

Beau Stubblefield-Tave, MBA, The Stubblefield-Tave Group, Newton, MA

This session identifies nine elements of cultural competence potentially reducing disparities. "Culture and the Clinical Encounter," is a framework that "connects the dots" between service capability (clinician cultural competence training), intermediate outcomes (improved communication, compliance), and better health outcomes for diverse patients/reduced disparities.

D7 Meeting the Challenge of Improving Access to Quality Healthcare for All Through the Creation of a Culturally Competent Health Workforce

Sheryl D. Taylor, MPH, UMASS Medical Center, Shrewsbury, MA; Lisa M. Morris, MS, Statewide AHEC Program, Worcester, MA; Edith H. Mas, RN, MSW, MA, (Lawrence), Michelle Urbano, MPH, (Boston), Arlela F. Bethel, MEd, (Springfield), Peter Shaw, PhD, (Boston), Joanne Calista, MSW, (Worcester), Brad Cohen, (Brockton) and Gay Plungas, MPH, (Pittsfield), MA Statewide AHEC System

This panel discussion is intended to highlight programs of the Massachusetts Area Health Education Centers in its mission to improve access to quality healthcare for all by promoting health careers and improving the education, supply, and placement of health professionals in underserved and culturally diverse communities. Panelists will provide examples of programming strategies designed to increase the number of multicultural and multi-lingual health care professionals need to improve access and quality of care to diverse populations.

D8 Psychosocial Predictors of Negative Outcomes of Pregnancy in Low Income Women

Rachel Zachariah, RN, DNSc, Northeastern University, Boston, MA

This presentation will examine the impact of attachment relationships, social support, life stress, anxiety, and psychological well being on negative pregnancy outcomes of low-income women. The author will discuss 1) current research base and gaps in knowledge; 2) major findings of a current study relating to predictors of negative pregnancy outcomes of low income women; and 3) approaches to facilitate community awareness and participation in planning and implementing research focused on the identification and prevention of key predictors of negative outcomes of pregnancy in low income minority populations.

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7:30 - 8:00 Registration & Continental Breakfast

8:00 - 9:00 Welcome and Keynote Ruben J. King-Shaw, Jr.
Center for Medicare and Medicaid Services

9:00 - 9:15 Break

9:15 - 10:45 Workshop Session E

E1 Strategies to Include Data for Minorities Within Minorities

Tom Chung, PhD, Executive Office of Elder Affairs, Boston, MA

Amidst current efforts to eliminate minority health disparities, certain seemingly objective methodological guidelines may reduce the chance of "minorities within minorities" (MWM) from being included in research. Such research practices, the small number of MWM and the emphasis on program efficiency are precisely the same factors that have been widening minority health disparities. Presentation will feature strategies to overcome the persistence of these factors.

E2 Strategies to Reduce Disparities in Oral Health

Susan Cote, RDH, MS, Michelle Henshaw, DDS, MPH, Gilberto Arciniegas, DMD, Corinna Culler, RDH, MPH; Kathy Lituri, RDH, and Harpreet Singh, RDH, MS, BU School of Dental Medicine, Boston, MA

Individuals of racial and ethnic minority groups experience a disproportionate level of oral health problems exacerbated by the lack of accessible community programs and services. Panelists will discuss established interventions and newly funded initiatives aimed at populations with the greatest disease burdens, the recruitment of minority and disadvantaged students into dentistry and the discovery of the best methods for preventing oral disease.

E3 Taking Action — How a Health Department Can "Undo" Racism

Barbara Ferrer, PhD, MPH, Boston Public Health Commission, Boston, MA

The Boston Public Health Commission's work on eliminating racial disparities in health outcomes is focused on understanding and addressing racism. The Commission has developed a unique framework to build community partnerships, promote an anti-racist work environment, and re-align external activities to address racism in health care. Issues addressed in the presentation include understanding the link between racial disparities in health and racism, developing tools for understanding how racism manifests itself in the work of public health, and identifying structural changes and assessment, policy development and assurance activities that can undo racism.

E4 Decreasing the Unequal Cancer Burden in the Diverse Communities of New England

Emily James, Juana Adams, Channavay Chhay and Marianne Arruda Martin, American Cancer Society, Framingham, MA; Betsy Bell, United States Surgical, CT

The unequal burden of cancer among ethnic and medically

underserved populations has been well documented but as yet has not been clearly delineated. This presentation will feature the path New England ACS followed to identify the need to increase the cultural competency of staff and volunteers and develop unique programs to understand the barriers that exist in specific communities. The panel discussion will include an overview of the New England wide outreach program and three unique community programs.

E5a The New Statewide Massachusetts Emergency Department Visit Database

Kathleen Kerwin Fuda, PhD, MA Division of Health Care Finance and Policy, Boston, MA

The Massachusetts Division of Health Care Finance and Policy has recently implemented comprehensive collection of data on all outpatient Emergency Department visits in Massachusetts acute care hospitals. Attendees will gain knowledge of the scope of services and hospitals included in the database, types of data elements included in the database, the availability of demographic, payer, and geographic data, and a new homelessness indicator, relevant to research on health disparities, and procedures for obtaining the data. 45 minutes **-and-**

E5b Testing New Technologies In Medical Interpreting

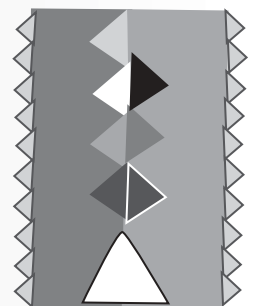
Loretta Saint-Louis, PhD, Elisa Friedman, MS, Emily Chiasson, MSW, MPH and Fernando Novaes, Cambridge Health Alliance, Somerville, MA

A panel reports on a clinic-based pilot study of four modes of delivering medical interpreting: face-to-face, telephone, videoconferencing, and remote simultaneous (UN-style). The objective is to learn the strengths and weaknesses of each mode to guide choices in service delivery. The study looks at patient, provider, support staff, and interpreter satisfaction; quality of interpreted communication; and costs. The panel will present conclusions, with comments on implications for service delivery choices. 45 minutes

E6 Nutrition, Functional Declines, and Health Disparities Among Hispanic Elders

Antonio Martin, MD, PhD, Odilia I. Bermudez, PhD, MPH, and Carmen Castaneda-Sceppa, MD, PhD, Jean Mayer USDA Human Nutrition Research Center on Aging/Tufts University Boston, MA

Recent studies indicate that racial and ethnic disparities in health status play a role in determining national patterns of chronic disabilities among elders. The panelists' findings indicate that Hispanic elders have inadequate intake of several nutrients, higher prevalence of chronic diseases, and higher rates of physical disability and cognitive decline than non-Hispanic white elders. This session will present new evidence on prevalence of health disparities among Hispanic elders, and present data on the significance of culturally appropriate interventions to improve functional capacity and health status of Hispanic elders.



E7 Diabetes Control Program Multicultural Coalition: Diabetes Information, Referral and Education Specialist Services (DIRES) Project

Maria M. Mathias, MSW, Rhode Island Department of Health, Providence, RI

The DIRES program provides information and referrals for people with diabetes and their families. One-to-one counseling, individual education and educational sessions are used. This workshop will present how to recruit educators, program guidelines and an overview of the curriculum/training guide that has been developed.

E8 Physician-Patient Relationships: Improving Communication Across Cultural Divides

Susan Moner, MD, Lahey Clinic, North Shore, Brookline, MA

The purpose of this educational initiative is to help physicians become more confident in communicating and treating patients of differing cultures. Objectives include helping physicians examine social and cultural beliefs and providing education about health disparities in US minority populations. Participants will have the opportunity to interact with a self-administered computer software program containing case vignettes of minority actors simulating patients with conditions identified as US health disparities. Treatment settings simulate an outpatient ambulatory clinic, an Emergency Department, an inpatient hospital service, and a community center.

10:45- 11:00 Break

11:00 - 12:00 Workshop Session F

F1 The Historical and Geographic Context of Asian American Health Care

Tom Chung, PhD, Executive Office of Elder Affairs, Boston, MA
Attendees will learn to avoid misunderstanding and overgeneralization by learning about the health care history and the current settlement pattern of Asian Americans.

F2 Barriers to Participation in Public and Private Insurance Programs Among Massachusetts Latinos: Focus Groups In Lynn, Brockton, Lowell, South Boston, Worcester, and Holyoke

Michael Doonan, PhD, Heller School, Brandeis University, Waltham, MA

This report provides insight into why eligible Latinos in Massachusetts do not participate in available public and private insurance programs. The study combines primary data collected through focus groups with secondary data and available information on access to insurance for this population. This session will present the analysis of attitudes, perceptions and preferences of people without health insurance presents work in support of the initiatives of the Center for MassHealth Evaluation and Research (CMER) for the HRSA-funded State Planning Grant.

F3 The Boston Clinical Pharmacy Practice Network: Lessons Learned From Pharmacy Care in Urban and Culturally Diverse Health Centers for Improved Health Care Outcomes, Increased Drug Adherence, and Self-management

Gregory C. Ewing, JD, MPH, Center for Community Health Education Research and Service, Roxbury, MA

This presentation describes the Boston Clinical Pharmacy Practice Network, a HRSA demonstration project wherein clinical pharmacists provide disease/case management, and how successful strategies for long-term lifestyle behavior modifications and prescription drug adherence are essential for reducing disparities in health care. Attendees will discuss the over-representation of minorities in diabetes, asthma and hypertension and learn how pharmacy care can generate improved health outcomes, improved prescription drug adherence, reduced pharmaceutical expense, and promote self-management skills.

F4 Mass CHIP

Saul Franklin, MS, MA Department of Public Health, Boston, MA

The Massachusetts Community Health Information Profile (MassCHIP), is an on-line interactive data warehouse developed and maintained by the Massachusetts Department of Public Health. This presentation will feature a system overview and preview newly available custom reports on minority health issues and concrete examples of the kinds of questions one can answer using this system.

F5 Perceptions of Prenatal Care in Manchester, NH: A Focus Group Study of Minority Women

Phuong Hoang, MS and *Andrew Ryan*, New Hampshire Minority Health Coalition, Manchester, NH

The New Hampshire Minority Health Coalition conducted focus groups with African, African American, and Latino participants to examine the barriers to prenatal care faced by minorities in Manchester, New Hampshire. These groups explored how the culture, language differences, physical environments, and health care coverage of minority women in Manchester affected their prenatal behavior and their access to care. Implicit in much of this discussion was the extent to which focus group participants felt that they received inferior treatment as a result of racial and linguistic differences or as a result of their health care status. Session attendees will be presented with major focus group findings.

F6 Reducing Cancer Disparities Among African Americans through Community Outreach

Linnah Madumadu, American Cancer Society, Framingham, MA

"Increasing Outreach and Decreasing Disparities in African Americans" (IODA), is a three-year American Cancer Society (ACS) demonstration project, designed to reduce disparities due to colon cancer among African Americans in the East End Community of Bridgeport, Connecticut. Through a seven-step community mobilization process, this project has been effective in opening doors to this African

American community experiencing a disproportionate cancer burden. Discuss strategies to create locally appropriate cancer control initiatives and investigate how this program may be replicated in any community.

F7 Crossing Paths: Cambodians and Access to Health Care

Niem Nay-Kret, Munty Pot, Southeast Asian Bilingual Advocates, Inc., Lowell, MA

The Cambodian Community Health 2010 Program (CCH 2010) seeks to increase access to health care and awareness about cardiovascular disease and diabetes among the Cambodian community of Lowell, MA. In collaboration with multiple local agencies, organizations, hospitals, and local university, faith based organizations and community members, CCH 2010 developed a plan to decrease the number of health disparities in regards to diabetes and cardiovascular disease.

F8 The Family Van Program: Innovative Approaches for Addressing Health Disparities

Rainelle Walker-White, The Family Van, Harvard Medical School, Boston, MA

Health disparities, particularly those related to chronic illness continue to be an alarming public health problem in the United States. Research shows that lack of or inadequate health care exacerbates this problem. Oftentimes, cultural, linguistic, logistic and psychosocial barriers discourage individuals with health insurance from obtaining care. Additionally, a lack of insurance can also discourage individuals from receiving ongoing and coordinated care for their chronic illness. This presentation will describe how the Family Van Program, addresses these issues by providing "outreach" and "in reach" for Boston's most vulnerable populations to secure appropriate healthcare including screening, self-care education, management, and follow up.

12:00 - 2:00 Lunch

Keynote Speaker: Dr. Nathan Stinson, US Department of Health and Human Services

Cultural Arts: Dr. Lincoln H. Douglas, Director of Prevention and Intervention Services, ALSO-Cornerstone, Inc.

2:00 - 3:30 State Breakout Sessions

3:30 - 4:00 Wrap-up and Closing



Current Partners

Action for Community Boston (ABCD); ALANA Community Organization; American Diabetes Association; American Cancer Society; Capitol Region Education Council; City of Portland; Connecticut Department of Public Health; CT AHEC Program; Fleet Bank-Community Banking Group (NH); Harvard Pilgrim Health Care Foundation; Harvard School of Public Health; Heller Graduate School, Brandeis University; The Institute; Latin American Health Institute; Maine Department of Human Services; Massachusetts Department of Public Health; Massachusetts Division of Health Care Finance and Policy; Massachusetts Division of Medical Assistance; Massachusetts League of Community Health Centers; The Mauricio Gaston Institute; Mental Health Center of Greater Manchester; New England HIV Education Consortium; New Hampshire Department of Health and Human Services; New Hampshire Minority Health Coalition; North American Indian Center of Boston; Rhode Island Department of Health; Southern Massachusetts AHEC; So. New Hampshire Outreach for Black Unity; University of Massachusetts Medical School; University of New England; US DHHS/Region 1 Administration on Aging; US DHHS/Region 1 Health Resources and Services Administration; US DHHS/Region 1 Centers for Medicare & Medicaid Services; US DHHS/Region 1 Office for Civil Rights; US DHHS/Region 1 Office of Minority Health; Vermont Department of Health

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If you need any further information or wish to inquire about our limited number of scholarships, please contact Michelle Surdoval, Conference Coordinator at 207-839-6381 or email at: 4.2003conf@harborhomes.org

Cancellation Policy: Cancellations must be made in writing and postmarked no later than February 25th, 2003 and are subject to a \$50.00 cancellation fee. No refunds will be made after February 25th, 2003. Sessions with fewer than the minimum number of participants may be cancelled at the Committee's discretion.



The lotus flower is a universal symbol that represents creative power and purity amid adverse surroundings. Because the buds, blossoms and seeds can be seen at the same time, it is considered an emblem of the past, present and future.

The sawtooth pattern is used in traditional textile design in the Yoruba culture. It is believed that its protective properties assist the wearer in warding off disease.

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